Approved for use through 9/30/98

Type a plus sign (+) inside this box [+] Patent and Trademark Office: U.S. DEPARTMENT OF COMMERCE Attorney Docket Number 4191-00025 PTO/SB/01 Kurt M.A. Badeau First Named Inventor (8/96)COMPLETE IF KNOWN **DECLARATION** Application Number Declaration OR Declaration Filing Date ☐ Submitted after ⊠ Submitted with Group Art Unit **Initial Filing Initial Filing** Examiner Name As a below named inventor, I hereby declare that: My residence, post office address, and citizenship are as stated below next to my name. I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled: DUAL SECTION EXHAUST AFTERTREATMENT FILTER AND METHOD (Title of the Invention) the specification of which is attached hereto OR as United States Application Number or PCT International □ was filed on (MM/DD/YYYY) and was amended on (MM/DD/YYYY) Application Number (if applicable). I hereby state that I have reviewed and understand the contents of the above identified specification, including the claims, as amended by any amendment specifically referred to above. I acknowledge the duty to disclose information which is material to patentability as defined in Title 37 Code of Federal Regulations, §1.56. I hereby claim foreign priority benefits under Title 35, United States Code §119(a)-(d) or §365(b) of any foreign application(s) for patent or inventor's certificate, or §365(a) of any PCT international application which designated at least one country other than the United States of America, listed below and have also identified below, by checking the box, any foreign application for patent or inventor's certificate, or of any PCT international application having a filing date before that of the application on which priority is claimed. Copy Attached? Priority Not Foreign Filing Date Country Prior Foreign YES NO Claimed Application Number(s) (MM/DD/YYYY) П ☐ Additional foreign application numbers are listed on a supplemental priority sheet attached hereto: I hereby claim the benefit under Title 35, United States Code §119(e) of any United States provisional application(s) listed Filing Date (MM/DD/YYYY) Additional provisional Application Number(s) ☐ Application numbers are listed on a supplemental priority sheet attached

hereto.

Signature

RESIDENCE: City Evansville

POST OFFICE ADDRESS

City Evansville

DECLARATION												
I hereby claim the benefit under Title 35, United States Code §120 of any United States application(s), or §365(c) of any PCT international application designating the United States of America, listed below and, insofar as the subject matter of each of the claims of this application is not disclosed in the prior United States or PCT International application in the manner provided by the first paragraph of Title 35, United States Code §112. I acknowledge the duty to disclose information which is material to patentability as defined in Title 37, Code of Federal Regulations §1.56 which became available between the filing date of the prior application and the national or PCT international filing date of this application.												
U.S. Parent Application Number	PCT Paren	t Number	ber Parent Filing Date (MM/DD/YYYY)			Parent Patent Number (if applicable)						
09/522,152			03/09/200									
☐ Additional U.S. or PCT international application numbers are listed on a supplemental priority sheet attached hereto.												
As a named inventor, I hereby appoint the following attorney(s) and/or agent(s) to prosecute this application and to transact												
all business in the Patent and Trademark Office connected therewith:												
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	Nun					Number						
Daniel D. Fetterley	20,3			Joseph D. Kuborn		40,689						
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I hereby declare that all st	atements mad fi	orther that th	nese statemei	its were	made wi	th the knowledge that willful false						
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thereon.												
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Additional inventors are being named on supplemental sheet(s) attached hereto.

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Please type a plus sign (+) inside this box [+]

DECLARATION				ADDITIONAL INVENTOR(S) Supplemental Sheet						
Name of	f Additional Joint Inventor, if a	ny:		□Аре	etition has b	een file	d for this u	insigned inventor		
Given		Middle Initial	C.	Family Name Haberkamp						
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